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ABSTRACT

Some of the provocative issues regarding integrated-service efforts arise from questions about how professional service providers are to go about the business of integrating services. This paper presents findings of a study that examined how street-level bureaucrats negotiate boundaries between the community in which they work and the agencies that employ them. The Community-Based Collaborative for Families (CBCF) is a pseudonym for a neighborhood-based, school-linked services model set in a medium-sized midwestern city. Since 1992 the study examined interactions between the CBCF and two low-income neighborhoods. Interviews were conducted with agency and school administrators, team members, residents, and school-community liaisons; observation; and document review. The study examined how CBCF teams negotiated the boundaries between two positions that were inherently in tension with one another: their "outside" expert status and their status of "inside" service provider. Residents and agency administrators held varied expectations for the CBCF's functioning, while team members themselves differed in their approaches to working with both residents and administrators. Team members shifted their positions or statuses regularly with an awareness of the contexts in which particular decisions and actions were situated. The paper also describes how team members achieved successes despite the contradictory demands. The lessons for systems change from the bottom up point to the promise of communication mechanisms across and within community and agency boundaries; of mechanisms for reflective practice; and of multiple understandings and mutual support. (Contains 14 references.) (LMI)

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Multiple Expectations of Community-Based Collaboration:

Lessons for Systems Change from Inside-Out

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This work represents a collaborative effort to which both authors contributed equally.

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Multiple Expectations of Community-Based Collaboration: Lesson For Systems Change from Inside-Out

Integrated services has been widely advocated in recent years as a promising response to the multiple and disruptive circumstances that impede student learning and school success (Melaville and Blank, 1991; Koppich and Kirst, 1993, Dryfoos, 1994). The literature on this topic has not only considered whether social and educational services should be integrated, but also how and to what effect (Rigsby, Reynolds and Wang, 1995; Knapp, 1995).

According to a report by the Consortium of Education and Human Services (Melaville and Blank, 1991), the integration of school services with many other child-related services may address the duplicative nature of service agencies by eliminating conflicting eligibility standards, or may eliminate the multiple procedures for, and locations of, application for services. The idea of linking various agencies together in an integrative fashion makes access to necessary services less difficult, and may prove less disruptive for students who would otherwise come into contact with myriad service agencies and clinics (Gardner, 1992). The idea that services, through an integrative and collaborative design, can be delivered in a preventive and holistic fashion rather than in a reactive and crisis-related way is attractive to many reform-minded policy leaders (Kirst, 1991; Adler and Gardner, 1994).

Most of the interagency and school-community collaborative programs are targeted for urban, low-achieving and socio-economically disadvantaged children and families (Wang, Haertel and Walburg, 1995). Inordinately, children in poverty suffer from socially induced problems such as violence, stress, depression, and neglect. Their health status and overall well-being is jeopardized by lack of information, lack of transportation, and therefore, lack of

access to prevention and intervention services. The interrelation of social, emotional and health factors increases the chance for substance abuse, teen pregnancy, delinquency and school failure (Dryfoos, 1994; Dryfoos, 1990; Schorr, 1988). All of these conditions put children in positions of being less ready to learn -- further placing them "at risk" of academic failure and of dropping out of school.

The premise on which many integrated services efforts rests is that coordinated service systems will do a better job at preventing and intervening in the complicated issues that put children "at risk" of school failure and the maladies mentioned above. This premise makes a number of assumptions: First, that service agencies are willing and able to coordinate their work; second, that the team of street-level service providers who are assigned by their "home" agencies to integrate services between schools and communities will know how to operate in a new, coordinated, integrated fashion; and, finally, that integrated services which "target" populations will be accommodated and accepted by service recipients (families and children).

These underlying premises of multiagency reform beg fundamental questions that challenge educators, policy makers and researchers as they set out to find vehicles for addressing the service needs among the complexities and conditions of children and families. Some of the more provocative issues arise from questions about how professional service providers, such as public health nurses, social workers, and school liaisons, are to go about the business of integrating services. These street-level bureaucrats are in the tenuous position of negotiating boundaries between membership within the communities in which they work and membership within the agencies that employ them. They are accountable for creating and

justifying a newly-conceptualized integrated effort -- a departure from their previous training and professional work experiences -- not only to their clients but also to their systems.

Our analysis of one community-based integrated services effort addresses some of these provocative issues by examining the nature of integrated service team providers, and by examining the multiple expectations and relationships nested within the integrated services idea. We frame our analysis with the following questions: What expectations do the participating agencies, team members and community members bring to the integrated services initiative, and how are they positioned to do so? What are the measures of community-based integrated services successes? What are the complexities of "success?" What system-wide changes are necessary in the implementation and sustainability of a multi-agency reform idea?

These basic questions present daily challenges at both a systems level and at a "street" level for service providers who are charged with implementing and carrying out an integrated services reform idea. We attempt to get at these challenges by addressing the multiple expectations that systems have of integrated services teams. In our analysis, we hope to bring to the fore both the promising and problematic nature of multiple perspectives and expectations in a multiagency endeavor.

Method of inquiry

To go about understanding, constructing and deconstructing meaning of the complex dynamics before us, our data collection and analysis were guided by qualitative research methodologies. A qualitative approach proved useful, we believe, for accessing and observing the perspectives of the multiple players involved in this interagency effort. Through

interviews, observations of interaction in context, and review of records or documents, this methodology allowed us to hear out the perspectives of multiple participants in this study.

Nature and extent of data collection

This analysis draws on data culled from a larger study, of which this paper is only a part.[1] Since 1992, a team of six researchers has amassed a sizeable amount of data: Through two rounds of interviews, our research team has conducted over 200 one-hour interviews with agency administrators, core and peripheral community-based team members, and residents in the two neighborhoods. We conducted additional interviews with school-community liaisons and administrators of each of the four participating schools (including school principals from one elementary school, two middle schools and one high school). Exit interviews were held with team members as they left the collaboration as well. Over 100 neighborhood CBCF team meetings and administrative governance committee meetings were observed (lasting at least two hours each) between Spring, 1993 and Fall, 1995. Documents reviewed included over three years of daily press clippings from the city's two local newspapers, neighborhood newspaper accounts of neighborhood activities, quarterly reports written by team members, project-related memos, speeches and press releases.

Nature of Analysis

Themes that emerged after the first two years of this four-year study guided the initial coding process of interview transcripts, documents and field notes. After the initial sifting and winnowing of the first round of interviews and field notes, we re-adjusted the thematic

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[1] This paper is one analysis in a much larger study on "Community-based Interagency Collaboration: A Critical Ethnography." The research is funded by the Spencer Foundation. Dr. Colleen Capper is the Principal Investigator.

schema. Accordingly, a second set of themes - both confirming and disconfirming - emerged which we used to code the second set of interview transcripts. Because this study is being conducted across two sites and across at least four core participating agencies, we have had the benefit of making within-site and cross-site analyses. In this way, the constant comparative method (Glaser, 1978) has proven useful.

Community-Based Collaboratives for Families: A case study of integrated services

County and city policy makers in this community have taken seriously the reform idea of linking social, health and law enforcement services with schools in the interest of addressing complex needs of school-aged youth and their families and communities. The Community-Based Collaboratives for Families (CBCF)[2] is loosely based on the work of Melaville and Blank (1989; 1991) - a neighborhood-based school-linked services model. CBCF is supported by four core agencies and additional community support agencies: the school district, the county human services department, the city public health division, the city police department, a community foundation and the United Way. The city/county government-initiated CBCF model was established in 1992 to "re-orient human services according to school attendance areas and bring services to families in need in their own communities" (CBCF documents). The model is preventive, holistic, family and child-centered.

The stated goals and purposes of CBCF are multiple and, in some ways, ever-emerging as needs and conditions warrant changes. The initial central mission, as stated in

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[2] In the interest of confidentiality, all names and locations will be replaced with pseudonyms and other concealing descriptors.

public documents, was designed to address the following aims: 1) to coordinate services and reduce duplication of efforts; 2) to make services more accessible and customer-focused; 3) to increase efforts to prevent and intervene earlier in children and family problems; and 4) to develop ideas for broader systems change. Later, an aim was added that focused on empowering residents "to maintain healthy neighborhoods and communities by building on the strengths and capacities of residents." Late into the second year of the initiative, after much deliberation, consensus on the goals was reached in a meeting of the two neighborhood teams and corresponding administrators. The goals that work teams were to accomplish were as follows: 1) Teams are put in place to offer a quick response to community needs/problems as they arise, and to learn what works as a response; 2) Teams are to be physically present and visible in the neighborhoods, and to offer regular "office hour" accessibility; 3) Teams have a primary mission of coordinating services, to have regular interactions and easy connections with each other; 4) Teams should relate to and build upon existing neighborhood resources, and try to involve other programs/service providers as partners in team activities; 5) Team membership should be based on community needs as determined by needs assessments; accordingly, team membership across the county need not be uniform; and, 6) Team service provision and outcomes will be evaluated in an ongoing manner to determine the future scope and strategies of the teams.

The systems change aim, introduced early in the development of CBCF, was based on one lead agency policy maker's conviction that service delivery needed to change so that services would become accessible, integrated, customer-focused and responsive. As this administrator put it:

> We know our systems need to change. We want our systems to change based on the realities of peoples' lives, not out of administrative convenience. . . We knew that public health and the police were already out in the community. . . We know that the schools had to be involved. . . and that county social work presence [could] work earlier in the . . . continuum of dysfunction (Interview notes, 1993).

Policy makers and reform leaders involved in this effort understood that coordinated and comprehensive services could be a reflection of a commitment to systems change, effectively re-orienting services in the interest of meeting needs of families and children.

Membership and context of Community-based Collaboratives for Families

Due to growing and changing socio-economic and, relatedly, racial demographics in this primarily Caucasian, middle-class mid-sized city, significant challenges continually emerged that gained the attention of local policy makers, the media and residents. Increased rates in juvenile crime, indications of poor child and family health and nutrition among minority community members, greater numbers of homeless children, and increased rates of poverty and unemployment prompted a policy response from the separate but interrelated agencies.

In a decentralized fashion, the core participating agencies (county social services, city public health, city police, and the school district) provided a team of staff members to implement and carry out the neighborhood-based integrated services model. Supervisors or administrators representing the four core agencies and related groups made up a governance committee that was formed to guide teams through the initial stages of CBCF. The governance committee met on a near-monthly basis to assess and determine policy directions,

resource needs and evaluation measures. Neighborhood-based team members were encouraged to attend the meetings to the extent that agenda items focused on their concerns. Otherwise, the attendance and participation of team members in the governance committee meetings was limited to reporting new developments or irresolvable issues.

The core CBCF team members include a county social worker, a public health nurse, a neighborhood police officer and a school representative or liaison, who have been located in neighborhoods targeted by city and county officials as low-income and high crime areas. There are additional or peripheral participants in the work of the CBCF teams, including parole officers, child advocates, school-community liaisons and neighborhood association members. The composition and nature of the teams depended largely on the needs and resources available in the neighborhoods, as well as the nature of team leadership.

The two neighborhoods in this study, which we will refer to as Walnut Grove and Kennedy Manor, are segregated economically and racially from white middle-class and working-class neighborhoods in the city. The government-subsidized housing complexes are tightly clustered and, according to the local media, are "high crime and drug infested." Walnut Grove and Kennedy Manor are also isolated from basic resources and services such as clinics, libraries, post offices, grocery stores, laundry services and, in Walnut Grove, the schools and social services. Subsequently, the CBCF teams are located within the housing complexes in order to facilitate interaction between system representatives and community residents.

In the absence of a clear direction or policy "blue print," neighborhood-based team members worked fastidiously and reflectively and in response to community needs, to build

mechanisms into their work to develop collaborative relationships within the neighborhood and to broaden understandings of each team member's professional work. One mechanism to accomplish this was to arrange meeting and office space that was friendly, accessible and comfortable. In each neighborhood, the office space that core team members shared was a two-bedroom apartment on the first floor of one of the central apartment buildings. One bedroom, which had a security lock, was used by the neighborhood police officer so that guns and ammunition could be secured. The second bedroom was shared by the county social worker, city public health nurse and school or community specialist. The living rooms in each apartment were used as meeting rooms. A large table and an ample number of chairs were available for team meetings or any other community group that needed meeting space. A telephone was also available for neighborhood residents who had no telephone of their own. Additionally, the kitchen was available to anyone. Coffee was brewed throughout the day, and was offered to all who came by the office. Frequently, popcorn and other small snacks were the fare for service recipients, visitors or members of community groups who used the space. Pictures and news clippings of community events and community members adorned the refrigerator door; posters from the Children's Defense Fund and D.A.R.E. were fashioned to most of the walls. The neighborhood teams developed a welcoming environment that departed radically from the prototypical "service office." This environment was an effective mechanism for connecting with children and families.

Another mechanism that the teams used for the development of their collaborative work was to schedule weekly meetings. These collaborative meetings lasted at least two hours, which included announcements of neighborhood events and family and child issues that

team members and residents needed to address. The meetings were also semi-structured to encourage participation from all involved members, thus allowing information and knowledge sharing to guide the discourse. Beyond the weekly meetings, information and knowledge sharing occurred in nearly every interaction between team members. Through weekly meetings and daily information exchanges, team members built shared decision-making and problem-solving into their work in the neighborhoods. Service recipients and "clients" were not assigned to a case manager or to one service professional. Rather, team members were collectively and collaboratively invested in their shared "clients."

Of the team members and administrators (a total over 30), nearly all are Caucasian with the exception of two school-community liaisons, a county social worker, a school social worker and a community-support specialist. Nearly all residents of the two neighborhoods are African-American, although there are some Caucasian and Southeast Asian residents in each neighborhood. Nonetheless, over the course of time and through demonstrated commitment, a level of trust was established between the neighborhood residents and CBCF team members.

Analytic Approach

Our analysis of this community-based services effort examines how the CBCF teams negotiated their way from the status of "outside" experts to "inside" service providers in two neighborhoods via an integrated services initiative. The multiple expectations and goals that guided the teams' work implicitly rested on their ability to gain "insider" status and to meet the expectations at three levels: the neighborhood, the team and the systems. First, in the neighborhoods, the CBCF teams were asked to work with and among residents in a community-driven, customer-focused way addressing issues of families and children through

prevention and early intervention efforts. Second, as a team, CBCF members were asked to work with and among agency counterparts with whom they had little previous professional experience. Finally, for the systems or agencies, CBCF team members were asked to provide guidance on how to change delivery systems and develop ideas for broader systems change. In their negotiation of accomplishing the many tasks that were expected of them, the CBCF teams were guided by a set of goals or principles of a holistic, family-centered prevention/intervention model. They were also guided or directed by the interests of both governing committee members as well as the community residents to improve service delivery and service provision. Further, the CBCF teams' actions were guided by their own professional experiences and intuitions about what they believed they could and should accomplish.

In this study, we listened to the cacophony of voices involved in the CBCF initiative: CBCF team members who represent school, health, police and social services agencies at the "street level," the heads or supervisors from the corresponding systems or agencies, and the residents of two neighborhoods. In our analysis, we hear out various perspectives - and the consensus and dissensus on the work of CBCF accordingly. Based on multiple and sometimes differing perspectives about the positions and roles of team members, we focus on the successes of the CBCF teams and suggest that these successes indicate promise for integrated services efforts. But at the same time, we elicit the problems or tensions of the CBCF initiative to demonstrate that the initiative is not "fail proof" and not without its complexities. Our analysis is an attempt to consider perspectives of the many stakeholders and recognize that there is no one best way to go about crafting an integrated services

initiative. Rather, there is value in experiencing the complexity of negotiating boundaries and multiple expectations in interagency collaboration. In the final analysis, we try to draw lessons from these experiences to inform those who are interested in systems change from the bottom up.

Negotiating boundaries and expectations in interagency work

Residents and administrative agency members held varied expectations for these interagency teams' functioning, while team members themselves differed in their approaches to working with both residents and administrative members of the various agencies. Customers of this effort were diverse in their characteristics as well as in their expectations for team practice, and these various views resulted in tensions that team members regularly felt.

"We're getting beaten down by these expectations." "I can't do it, I feel like [I'm] letting everyone down." "This is a flaw in the model." These comments were made by various Kennedy Grove team members during a discussion about roles their team was being expected to fulfill (Field notes, March 29, 1995). In this section, we focus on main points of tension that team members experienced through an examination of team members' negotiations of their boundaries in the various communities in which they were situated. We then consider the degree to which team members were able to create successes within the complexity of the shifting insider-outsider statuses which they occupied.

Difficult and tenuous processes of negotiating where team members "stood" developed from the multiple expectations they experienced or perceived in relation to two spheres: their professional home agencies and the communities in which they were based. In this section,

we propose that team members struggled within a context of multiple guiding principles, sources of direction, and professional actions based on many affiliations. Team members' positions and decisions were not static and unchanging. Rather, those involved in CBCF shifted their positions or statuses regularly and with an awareness of the contexts in which particular decisions and actions were situated. Because of the fluid nature of team-resident and team-agency relationships, we characterize in this section team members' negotiations between and among their various affiliations with residents and agency members. We first emphasize the ways that team members felt like insiders in their agencies and in the communities in which they were based, and then consider how those two positions were in tension with one another.

Team members were appointed to the teams and supervised by administrators in their respective agencies. In many cases, their supervisors assigned them additional duties outside the neighborhood or duties within the neighborhood that were beyond the scope of their involvement on the CBCF teams. Several team members articulated or demonstrated that they were closely linked to or "inside" a system, and that their agency informed and influenced their work on the interagency teams. In one example, Chris, a police officer at Kennedy Manor, had not shown up for a meeting and no one had heard from him to explain his absence. Mid-way through the meeting, he walked in with another person from his agency, asking all who were present to fill out surveys that had been requested by his supervisor. With our completed surveys in hand, he left the meeting to continue the process in the neighborhood (Field notes, June 7, 1995). Chris' direction, in this case, was taken from his home agency rather than from the community or the multi-agency group, as his

home agency work took precedent over a team commitment. Team members were continually aware that they were directed, at least in part, by the agencies with which they had their initial affiliations.

In many cases team members also began to hold an "insider" status within the communities in which they worked. While team members had received specialized training and socialization about how to be members of service-providing systems, they had not received similar training on how to be insiders within these particular communities. Therefore, through a time-consuming and often difficult process of building trust and getting to know community members and norms, team members eventually reduced the degree to which they represented the agencies and increased the degree that they were considered members, or insiders, of the communities. For example, while Julia, a public health nurse, explained that she has been accused of being "co-opted" both by the community and the systems, she felt that her job was easier in the community. In her words:

> I'm not in any place. I'm sort of in between. I found people in the community as more accepting than my system was. People in the community, you just explain what's up and they say OK. It's easier [in the community] than [in my agency] (Field notes, December 14, 1994).

Team members' actions reflected a desire to be recognized as members of the community. Alex, a Kennedy Manor social worker, discussed taking two neighborhood children on a trip to tour museums (Field notes, July 13, 1994). And police officers in both neighborhoods considered breaking down barriers between themselves and community residents by not wearing police uniforms and by dressing similarly to residents (Field notes, February 15, 1995). A Walnut Grove social worker said that she didn't think that the residents looked at

the CBCF team as a bunch of professionals. In Betsy's words, "We're more of a partner, a friendly partner" (Field notes, May 24, 1994).

Throughout team members' interactions with residents, we observed both their attempts to become accepted members of the communities in which they worked, and to ponder the utility of those attempts in relation to their professional roles. At the root of the complexity of responding to agencies and community residents as insiders and outsiders were varied understandings of what those affiliations might mean for practice. For example, while team members may have been considered community insiders for a variety of issues, there were some topics that the team was not comfortable broaching both because of their dual status as agency representatives and community workers and because of their absence of life experiences in particular areas. In one conversation in Kennedy Manor, team members wondered about their ability to open discussions in relation to gang activity. We wrote in our field notes:

> Celia [a neighborhood-based school social worker] said, "That's one of the things I can't say to parents: What do you think about gangs?. . . I don't know what level they are in thinking about it." Julia said that Amy [a community member] is a good person to talk with about it, "She's one parent and one colleague that I think we could use to help us understand this." . . . Alex commented that he appreciated hearing comments about the unease of talking with parents about gangs. [In his words,] "We probably aren't the ones who can say those things to people. These are people who have a foot in both worlds. And they'll come to our world and listen to us, but there's the other world that they're not willing to give up and they're not ashamed of it." Julia asked if this division has to exist forever then. Alex responded that it didn't, but that right now they need help from residents to understand the situation. He commented that they still are seen as "the system" (Field notes, March 1, 1995).

These negotiations in the precarious place of being linked both to community residents and to systems or agencies led to "hallway management," according to a Walnut Grove social

worker, and frustration at the lack of structure or "blue print" guiding CBCF work (Field notes, April 14, 1995). Resulting quandaries were summed up by Julia with these words:

> We still are the system . . . and we are outsiders no matter how accepted we are. And it's easy to forget that because you're in a certain relationship because you know this person. And then it's like, "Oh, yeah, I'm the [system]" (Field notes, October 19, 1994).

Team members sometimes considered themselves as community insiders, but were jarred back into remembering the terms of their dual status as community and systems insiders. They recognized that their actions and decisions had consequences for community residents, such as the possibility for unwanted agency contacts, that their neighbors' actions did not.

In another example of the complexity related to team members' dual statuses, the guiding principles or expectations of these interagency service teams largely related to a two-pronged mission encompassing both systems change and neighborhood-based family crisis intervention and prevention. On one hand, team members were to use their professional skills and positions as system insiders to provide intervention and prevention-related services, such as those related to health, safety and education. Simultaneously, though, team members were asked to learn from their positions as community insiders to inform systems change. In other words, through this dual approach, the original design was to reconstruct bureaucratic systems so they would be more responsive to community members' needs and concerns. In theory, this design was a bottom-up approach to reform. We learned, though, that without regular systemic support and communication, team members were placed in a difficult position of prioritizing their allocation of time and energy in relation to a systems change or intervention and prevention focus.

We also observed tensions in negotiating between many spheres as team members struggled to determine the degree to which they should be outside agents coming in to "fix" the neighborhoods or inside resources with particular sets of skills and resources to be tapped by other community members. While it seemed that team members preferred to see themselves as community resources, they were also aware that their insider statuses within systems urged them to initiate resolution to community problems and be accountable for pre-determined goals set by their systems.

Through many incidents and conversations among service providers, administrative leaders, residents, and themselves, team members wrestled with tentative and conflicting ideas of how they should interact with and be informed by residents. Teams continued to exist in the tensions caused by the contradictory expectations posed by their positions in multiple spheres.

Successes of and resistances to CBCF

Thus far, we have laid out what we believe to be the main tensions for team members as they negotiated the terms of their practices in relation to their agencies and communities. Team members were informed by multiple expectations, all of which influenced their choices and possibilities for professional action. We turn now to the ways team members reacted to those multiple expectations and directions, emphasizing the extent to which CBCF met its stated and unstated goals.

Amid the multiple expectations made of CBCF teams in the communities we observed, team members were able to succeed in oftentimes unintended and unanticipated ways. We witnessed countless events that could have been perceived, at least by some, as being

successful interactions for individual CBCF team members, the initiative as a whole, and neighborhood residents. In this section, we focus on some of the successes that have been attributed to the CBCF teams, as well as corresponding complexities team members experienced in approaching their goals. We draw these coexisting successes and complexities largely from team member perspectives by focusing on team members' relationships with system, team, and community members as they tried to achieve initial goals set out by CBCF. In each section, we examine how and whether team members carved out successes and worked toward original CBCF goals within their contested terrain.

Goals: To coordinate services and reduce duplication of efforts &
To increase efforts to prevent and intervene earlier in children and family problems

As stated in initial goals for the CBCF initiative, locating team members in neighborhoods was a way to give them privileged insight into how systems could change to better meet the needs of their "customers," the service recipients. While we saw less evidence of how systems on a large scale were changing, the ways that team members were able to interact with agencies other than their "home agency" were expanded. One of the successes that we witnessed in these interagency efforts was that team members became more knowledgeable of and comfortable with each other's systems and, therefore, could direct community residents more quickly and effectively to a variety of resources or respond as advocates for children. In this sense, team members were showing success at meeting the goals of coordinating services better and increasing efforts to intervene earlier in community and family problems.

In one example, a Walnut Grove team school social worker, Don, reported that a boy who had been "on the run" for fear of being sent to corrections had turned himself in (Field notes, February 15, 1994). Betsy, a social worker, speculated that his mother may have changed her mind about sending him to corrections because of the CBCF team's encouragement that their family stay in the neighborhood and work closely with the team instead. Betsy opined aloud to team members that this was a real "community-based collaboration for families." In Kennedy Manor (Field notes, September 28, 1994), Monica, a school-community liaison on the team, brought up a child who had run away from home, but was still attending school. She asked what actions she should take in the eyes of the other team members. Alex and Sam were able to offer possible solutions from human services' and the police department's perspectives respectively. CBCF team members' contributions of their own system knowledge allowed all team members to have a wider range of options for and perspectives on how they could best help the community residents with whom they were working.

These successes, though, were hesitant and tentative, as many team members and non-team members, questioned the ethics of sharing information across departmental or system boundaries. This confidentiality question was a continual deliberation of team members as they struggled to maintain an ethical balance between sharing information to help community residents and sharing information that may harm them. Team members believed that this sharing depended on many factors, among them the type of information, when, how, and if it would be used, and the circumstances of the individual family being discussed (Field notes, February 24, 1994). On several occasions, community residents expressed frustration that

their "business" was being discussed with others or that the CBCF meetings were a "beehive of gossip." And in one case, a person who was invited to participate in the team's processes elected not to do so, at least in part because of his concerns with confidentiality (Field notes, March 22, 1995).

The issue of confidentiality is not as clear in situations of interagency collaboration as it may be with agency members outside of such a collaborative arrangement. As Alex, a Kennedy Manor social worker, pointed out, "Much of this information is not confidential because it is our information. We are here observing and experiencing. Much of the information we exchange is not from records -- it's from our own observations in the neighborhood" (Field notes, October 19, 1994). He further emphasized that community residents are in control of whether or not they want to use team members for assistance and support. In his words, "They're in charge of that. They've used the police, and they've used me, and Julia has been the main contact. It's a little bit fluid, but they're still in charge." From our observations, confidentiality has been and will most likely continue to be a difficult critique of a strategy that allows interagency service providers to share information across system boundaries even if it does achieve the goals of coordinating services, reducing duplication, and intervening earlier in children and family problems.

Goal: To make services more accessible and customer-focused

Team members saw their attempts to be customer-focused, or community-driven, as integral to their constructions of CBCF practices because of their perspectives as insiders of the community. A resulting success of this interagency service provision effort was that programs sponsored or supported by interagency teams had the capacity to be more

responsive to community needs. By being located in neighborhoods, CBCF team members were able to talk regularly with residents and find out from those conversations what services were needed or desired in their communities. Betsy, a Walnut Grove social worker, commented that:

> [The] most beautiful thing [about CBCF is] we never assume that we're in charge of anything. I have the attitude that I'm the residents' employee as well as the employee of human services. What counts is that the residents are in charge of this. We're not here to do anything in this neighborhood other than what they want us to (Field notes, July 5, 1994).

Throughout our field notes and our interviews with team members involved in the CBCF initiative, we learned that many team members were driven by the idea that they were to be community-focused and community-directed.

One resistance to this "success," though, was that team members' responsiveness to community residents was seen by some as enabling dependency to occur, rather than encouraging residents to take control over their own lives. For example, the Kennedy Manor team struggled over whether they should personally provide transportation for residents to medical appointments and grocery stores. Some members also deliberated about whether they should loan their personal funds to community members in need. They additionally wondered if they should allow residents in their community to register for school at the community center, rather than insisting that they go to the schools to do so.

In preparation for a retreat where Walnut Grove and Kennedy Manor team members, agency administrators, and other interested parties would be in attendance, a discussion about whether or not to invite residents highlighted the struggles felt by various members about the

degree to which this initiative should be community-driven (Field notes, February 3, 1994).

In our field notes, we write:

> Betsy [a social worker from Walnut Grove] brought up having residents [attend] the retreat. Julia [a public health nurse from Kennedy Manor] had a very negative reaction to having the residents there. She felt that the meeting would be "hairy and complex." She felt that the residents would not work well in "think tank meetings." She felt there was danger in working 8 hours and the possibility of having no conclusion, [leaving residents with a] here-we-go-again attitude and the teams would be perceived as not having their act together. . . . Betsy said her motivation to include residents was so they don't miss something. [She believed that] the residents don't necessarily have to be involved in the actual writing of the document but they should give input into the process and the development of goals and objectives for CBCF. [As Betsy said,] "If we can't have our discussion with residents in the room that says something."

While to some degree team members felt that their efforts should be guided by the communities, they also retreated to their professional spheres when trying to "figure out" what their professional roles should be. Professional boundaries sometimes interfered with CBCF's attempts to be community-driven.

One example that we witnessed of the ways CBCF team members enacted the principle of being community-driven was by their participation in community organizing and development, even though that role was not understood initially to be a goal of the CBCF initiative. By virtue of their location in the neighborhood and access to professional and personal resources, team members provided guidance and strategies as community members attempted to organize community groups and initiatives. Team members recognized the risk of enablement and taking over for the community, though, and contemplated their efforts carefully so they would not overstep their boundaries and lead community initiatives. In Julia's words:

> We take directions from the community. We see what they are doing. We don't take the lead, we play second in line. We are a group of agencies with the resources and can make stuff happen, to do what we are invited to do and make sure we listen and are open to what we're invited to do (Field notes, March 14, 1994).

Team members generally saw their efforts as supportive of, rather than leading, community organizing.

Even with this caution, though, several administrators and team members raised questions about whether team members were taking over responsibilities and initiatives that should be directed and supported solely by members of the community or by other service providers. Some were concerned that team members would interfere with the "natural" events or progression of communities. For example, Paula, an administrator, said at an administrative committee meeting, "When CBCF intervenes as a support [for community programs], that confuses the issue" (Field notes, November 28, 1994). Greg, another community leaders and service provider, viewed CBCF differently. He believed that CBCF should provide leadership in the community. In Greg's words, "The community needs leaders. They need a push. That's why CBCF is out here" (Field notes, August 10, 1994). CBCF's role as a community organizer, leader or resource was continually contested terrain.

In one team discussion about the roles that they should play in relation to community leaders, the Kennedy Manor team considered the complexities of the interactions that they were having with community members. In our field notes, we describe the following:

> Alex commented that, "I've mirrored what I was told when I came in here until a few months ago -- I didn't give my opinions and just responded with a shrug when asked something." Now he says that he gives his opinions to the [community organization] when they ask. He said that when he develops a personal contact with residents, he feels obligated to show more of his personality and a commitment. "We're interacting as people now." Julia said, "We can try to hold that line. I feel that there's some sort of line that we need to hold. Once we step over the line, we can't go back. What are

> we saying about CBCF? What are our systems doing in this neighborhood? And what are we learning about neighborhoods like this?" Sam responded that, "We're here to support the neighborhood and allow it to grow. . . . We didn't put the hurdles there. Nor did we say that they have to be crossed. But if we can help them get over them, I think we should" (Field notes, July 27, 1994).

Both teams seemed to be engaged in continual struggles over what their roles should be in relation to community organizing. As team members attempted to achieve the goal of being community-focused and community-directed, they simultaneously struggled with internal self-doubts and external insinuations about enabling community members to not become involved in leading their own communities.

Goal: To provide personal and professional support for other front-line interagency team members and for an interagency mission

While not an initial goal of the CBCF initiative, we found that team members identified one of their successes as providing personal and professional support for one another and for the struggles involved in developing and maintaining an interagency mission. Team members came together with their own unique backgrounds and training in their specific agencies, yet they were expected to relate to each other in highly complex situations, with multiple customers, expectations and goals. Team members often came to rely on each other because system and community members were not able to understand or relate to the multiple directions in which they were pulled. Similarly, it seemed that team members acutely felt that pain that accompanied the multiple expectations of interagency collaboration. In personal reflections about her participation on the Walnut Grove CBCF teams, a social worker stressed that the complex positioning involved in working on a community-based interagency team was at times personally and professionally very difficult. As Betsy said:

> It's not something that you think about when you think about collaboration in the neighborhood, and there are so many benefits to collaborating in the neighborhood that most of the time they out-weighed the hazards of being in the neighborhood. But, this is worth at least a footnote in the collaboration literature that, the closer you get to the pain, the more you have to take care of yourself and the more risk there is of getting burned out (Field notes, April, 1995).

And Sandra, a Walnut Grove public health nurse, claimed: "I've been a nurse for over 11 years and I've not felt so overwhelmed in all these years. I feel very insecure" (Focus Group, May, 1995). In Kennedy Manor, a new community-based school social worker asked for support and direction from the team for how she should decide among the conflicting requests for her time. In Celia's words:

> I feel like I need some support from somewhere to draw some lines around what I'm doing. . . . I need some support to say that I can't do that, because what I'm really saying is that it isn't the highest priority for me. And I need some support to say that (Field notes, December 14, 1994).

We learned, though, that this mutual support developed by team members can only occur with a strong commitment from all partners that is often hard to create. Team members were individually and collectively pulled in many directions and couldn't always rely on each other as sources of support. In many cases, neighborhood police officers in both Walnut Grove and Kennedy Manor were unable to come to meetings or communicate regularly with other team members because of their many responsibilities and priorities. Additionally, school personnel were concerned that they were not getting enough from the teams in relation to their own professional goals. As Monica, a school-based social worker, articulated: "[These meetings] don't do any good unless I talk about one of my kids [from the school]" (Field notes, December 29, 1994). In another example, a school staff member was invited to participate on the Kennedy Manor team, but chose not to. He asked other CBCF team

members about their commitment: "What level priority is this and where does it stand in terms of everyone's commitment? . . . I don't think the [school] principals really know what's going on here, so it's hard to make a commitment to it" (Field notes, March 22, 1995).

The multiple expectations team members faced with were generated within agency, community, multi-agency, and personal contexts. Each of these contexts provided compelling reasons for acting in certain, sometimes conflicting, ways and left team members unsure of how they should respond within this interagency context. For example, when pressed on why he wasn't attending regular CBCF meetings, a Walnut Grove police officer expressed his inability to meet all of others' expectations of him. John responded, "I support you and what you are doing here fully and I want to be at all of the meetings. The problem is that I am pulled about a thousand different ways and what I am giving now is all I can give" (Field notes, March 15, 1994). And Sandra, a Walnut Grove public health nurse, responded to a question regarding who was in charge of establishing her role by answering, "I am [in charge.] I just say 'I can't do it anymore' " (Field notes, July 5, 1994). Team members worked diligently to respond to the multiple expectations they were experiencing. Within the tug-of-war between competing interests, their attempts to support each other and an interagency mission were complicated by competing expectations and, sometimes, a resulting lack of commitment to team processes.

Goal: To develop ideas for broader systems change

One of the seemingly most promising aspects of this interagency collaboration was its perceived ability to affect broad systems change. By virtue of their neighborhood location, it was expected that team members could take community members' perspectives and act as

translators to communicate ideas for change to administrators in their systems. At the front-line level, the Walnut Grove team pointed out many ways that some of their system counterparts had begun to change as a result of CBCF. For example, Betsy, a Walnut Grove social worker, told other service providers at a meeting, "What we're talking about here is a change of attitude in addition to a change in agencies. I like to bring other social workers in here because it changes their head-sets. It's a way to see neighborhood-based interventions and to have neighborhood-based intervention ideas working in their heads" (Field notes, February 22, 1994). And team members felt that police officers who worked in their neighborhood, but who were not a part of the team, were beginning to refer more frequently to the team for assistance (Field notes, October 18, 1994).

At a broader level, though, the systems change agenda was not perceived to have been met. As Andy, an administrator, commented, "That's where we've all gone wrong. We've lost our ability to affect the system" (Field notes, February 22, 1995). Many CBCF members offered reasons for why they and their systems were not able to meet the systems change agenda they had established. For example, Magda, an administrator at one of the core agencies, told us that resources and authority over certain areas were separate, rather than pooled, and further that this separation led to systems that were not able to respond to calls for more holistic approaches to service delivery (Administrator interview notes, 1995). Several others cited reasons related to the absence of viable communication mechanisms between team members and those administrators who were in positions to be "systems changers" (Administrator interview notes, 1995; School social worker interview notes, 1995; Social worker interview notes, 1995). A Kennedy Manor team member believed that such

great tension existed between the administrative group and team members that they were not able to communicate anything, much less their ideas for how systems could change. In her words:

> Not only do I see [tension between the governance committee and the team], I sense it and I feel it. When I go to the governance committee meetings, it's like you have to have on your administrative hat in order to be heard and to be reconciled with -- it's not a good feeling. . . . I have a real difficult time on that committee because the agencies are there seemingly to talk about what their agencies can do for the CBCF team. And to get simple things from them is just like pulling teeth, you know. I don't think they have a real good sense of the day to day, front-line, ongoing kind of operation, you know. Theoretically, in a paper they read it, in our [team] reports and so forth, and they agree and say, "Yeah, I understand." But their response is just contrary to what they say that they understand (Team member interview notes, 1995).

And a Walnut Grove community support team member believed that while the teams were communicating ideas for systems change back to their agency administrators, their words were not always met with the desired actions. In Arthur's words:

> I think that CBCF is doing a good job in listening to the community and getting information back. . . . [But] systems are slow to change, so information [that] CBCF feeds back to the system may not have the impact, you know, that [it] was intended to have. . . . It will take awhile you know for . . . the system to change" (Community support worker interview notes, 1995).

The lack of formal communication mechanisms and a culture supportive of open dialogue in this extremely complex and complicated interagency work presented great difficulties in CBCF administrative members' abilities and willingness to listen to team members' suggestions for appropriate systems change, even though that was one of the primary goals of this effort.

One further stumbling block to systems change that a few members pointed out was that once they "left" the agencies to be located in communities, they were no longer considered to be the same type of systems member that they once were. They suddenly

become systems outsiders, no longer having the same credibility that they had when they were located in the office with other systems members (Public health nurse interview notes, 1995; School social worker interview notes, 1995; Field notes, January 18, 1995). The irony of this situation is clear, as their location was to have provided them greater insight into the workings of their systems as perceived by service recipients. Instead, their positions created a "credibility gap" across which systems members had difficulty seeing or hearing. As CBCF team members attempted to provide ideas for broad systems change, they were met with challenges related to the lack of open communication mechanisms with the governance committee.

In this section, we have presented multiple expectations and perspectives of interagency team work through a case study on community-based collaboration for families. We have also considered how team members negotiated within those multiple expectations to achieve successes in some areas of their work, as well as the complexities of those successes. We not turn to our suggestions for informing systems change that would best support and fulfill the promises of interagency collaboration.

Promises ahead: Moving from problems to possibilities

While perhaps an unintentional consequence on the part of interagency policy reformers, the CBCF interagency teams were asked to meet both agency and resident expectations, but interestingly, the reformers were virtually silent on how they positioned themselves to change. These various expectations and multiple purposes of interagency work pulled the team members in directions that, at times, were seemingly at odds or in a match of tug-of-war as they positioned their work inside the neighborhoods and positioned themselves

to inform systems change. Team members were to work to prevent and intervene in family crises while at the same time informing systems of ways to change and deliver services in a more efficient and effective manner. Team members were expected to empower residents to do for themselves, while at the same time team members were considered enablers when they participated in community level activities that, to some extent, went beyond the purview of their professional expertise.

The interagency team members who were charged with implementing this reform idea operated under mixed expectations and unclear priorities. What the teams viewed as responding to community needs, the agencies viewed as community organizing. What the teams viewed as information and knowledge sharing, the residents viewed as gossip and breach of confidence. Additionally, team members felt torn between whether their place was inside or outside of the communities in which they worked or their agencies employed them.

We heard about and observed many challenges that the integrated teams experienced in responding to the needs of both the neighborhood residents whom they served and the systems or agencies which employed them. Despite these numerous challenges and expectations layered upon the integrated services team though, we also observed successes that the teams were able to accomplish. The CBCF neighborhood team successes were a reflection of what resident, systems and team members determined to be the direction of their work. However, these successes did not come without a great deal of focused and serious deliberation about the purpose of the work of integrating services and systems. The successes were not accomplished without mutual understanding about the other team members' work, or

without in-depth self-examination and lengthy negotiation about team members' places inside neighborhoods and systems.

What appeared to be problematic was the goal of systems change, however, the systems did not always expect of themselves what they expected of team members. Our analysis indicates that while systems administrators placed a considerable amount of responsibility on the teams for both contributing to system-wide change and to coordinating intervention/prevention efforts, there were few mechanisms built into the design of the collaborative effort which asked the systems to accept similar responsibility for themselves. Moreover, the neighborhood teams were held accountable to their many customers, but were not granted exclusive authority to make decisions about what they deemed the most important use of their professional time and skills.

What do these tensions, conflicts, and negotiations say about systems change? We have seen that the teams were able to respond to the expectations placed upon them, despite the seemingly contradictory or polemical nature of the demands. And therein we see the promise that negotiations, deliberations, and supportive mechanisms have in informing change. To the extent that systems change was to occur, teams were not in and of themselves the sole agents. Systems are much broader than the CBCF neighborhood teams, and accordingly one might expect the responsibility for change to be shared across the initiative as a whole. From the experiences of this neighborhood-based interagency collaborative effort, we suggest that there are numerous lessons to inform systems change from the bottom up.

1. The promise of communication mechanisms across and within community and agency boundaries.

Numerous participants in this collaborative, including team members, residents and agency administrators, recognized that conflict and tension is the result of an effort that operates without a systematic and reliable mechanism for communicating needs, roles, and expectations of all the involved parties. The lead agency administrator in CBCF, Anne, voiced an anxiety that funders, agencies, and the community were being left with an impression the teams "don't know what they're doing" (Field notes, January 4, 1994). A conversation among team members poignantly demonstrated the paralysis incurred from the lack of communication among and between agencies:

> The school social worker, Monica, referred to a comment made by a property manager that there may not be a neighborhood cop in the future. The neighborhood cop, Sam, spoke up and said he didn't know anything about this. The school liaison, Celia, asked, "Why don't we know what's happening with the police department? Why don't we know what's happening with the county [officials]?" Monica commented that it was time for each of them to talk to their respective agencies and get some answers. Julia said that her supervisor didn't know the answers (Field notes, March 1, 1994).

The premise on which this particular collaborative was based, and on which many integrated collaboratives are based, is one of changing the top-down authority structure and implementing more of a grassroots or bottom-up reform mechanism. This is a concept which may be symbolic, i.e., placing teams in neighborhoods, but one which is difficult to accomplish in actual practice. An example of this realization might be to place the integrated services teams and oversight committee members on equal ground, and to build in communication mechanisms, such as small forums, through which policy leaders hear from and are informed by team members about how the systems either hinder or could facilitate better service delivery. In the words of one of the school social workers, "If they [policy makers and overseers] really wanted to know [what happens in the community], rather than

just for paper and political purposes, they'd come to our meetings" (Field notes, March 9, 1995). The success of implementing an integrated services effort and also accomplishing the overwhelming task of informing systems changes while addressing family crises may very well hinge on the existence and use of both bottom-up and top-down input and feedback mechanisms for communication.

What we learned from the CBCF teams is that without thorough deliberations, regular time commitments, and visible presence, the call for change is only symbolic. In order for teams to inform systems change, mechanisms of communication and a culture supporting open dialogue between teams and sponsoring agencies are necessary. If systems are to realize change, then it is incumbent upon agency leaders and reformers to institute mechanisms of communication between and among agencies heads and administrators and to make dialogue a priority.

2. The promise of mechanisms for reflective practice

Another response or method that is frequently under-estimated and under-utilized is the idea of building into the integrated services design a mechanism that allows time and distance for reflection on team practices and leadership decisions, and that also supports celebration of small and incremental successes. Too frequently, the momentum of reform diffuses the importance of accounting both for what is going well, and what is problematic and tension-filled. After two years of blazing the trail for CBCF, the Walnut Grove team, in a reflective moment, pooled together the talents of the various team members and residents and held an impromptu picnic outside the office doors on a warm April day. A resident who is well-known for his barbeque prowess managed to gather dozens of chicken legs; the

school-community liaison ran to the corner market to get a frozen cake. Various others pulled together snacks and drinks. The occasion was to celebrate several April birthdays among team members and regular resident participants, but the occasion was also a well-needed moment to simply enjoy one another. As if apologizing for "letting go" of the day-to-day urgencies and pressing issues before them, the neighborhood social worker asked that our research field notes reflect that they are "only following what Together We Can said, which is to reflect and celebrate once in a while" (Field notes, April 28, 1995). What the team was celebrating in an unstated way was that residents and team members had arrived at a point where they could stop and reflect on their work while celebrating and enjoying one another.

The common-sense notion of a community-based integrated services initiative often appears crystal clear at the outset but muddies quickly as perspectives are clouded by barriers and conflicts. Recognizing what goes well in a multiagency collaborative, as well as what impedes progress requires an element of both critical and constructive reflection,, time and distance. Some team members and agency representatives recognized this, and pined aloud for the time and distance to reflect on the multiple activities and events that were unfolding before them on a daily basis. As one school social worker, Don, said upon leaving the team for a new job assignment, "I like to think about this kind of stuff philosophically. . . I wish I had the time to stand back and think about it" (Interview notes, 1995). Others recognized the human cost of the tensions, ambiguities and divisions that were taking place as a part of the dynamics of this multiagency endeavor. A social worker in Walnut Grove, Betsy, reminded us that dealing with the pain and burnout was worth at least one footnote in the interagency collaboration literature. Celia, a school liaison in the Kennedy Manor neighborhood

contemplated the tension that was borne out of the ambiguity of her work. But, upon realizing that she could not easily turn to her interagency counterparts because of the similar pressures that they endure, she said: "I need help in talking about what we're doing out here. I need help doing that - where am I going to get it?" (Field notes, March 29, 1995).

Mechanisms that would encourage the agencies to reflect on and celebrate the initiative as a whole might allow for broader understanding and respect for the work before them, just as team members came to broader understandings of the work of their counterparts. It might also reduce burnout and turnover. Questions to reflect on might include: In meeting evaluation objectives, have we built in time to ask if we are on the right track? Are we doing and measuring the right things? Have agency members familiarized themselves with other agencies? Are agency structures and conventions impeding the potential success of the teams and agencies through such things as incompatible fiscal calendars, standard evaluation measurements, non-participatory meeting formats? Are systems prepared to "let go" of conventions? Does rhetoric reflect practice? Are agencies asking of themselves what they are asking of the teams?

3. The promise of multiple understandings and mutual support

The ability of team members to transcend their professional categories of expertise, to transcend a sense of "insider or outsider," was reflected in their ability to bridge knowledge gaps and to overcome information barriers. Sharing knowledge and coming to understand each other's systems was done with a great deal of effort. Team members' interest was in providing better services for children and families, and through collaboration, practicing in a more efficacious manner. Though difficult, the teams were aware that, in many ways, their

collaboration and integrated practices were successful. There were frequent instances in which out-of-home placement issues were avoided, or in which alternatives to student suspension were problem-solved. As Sandra was quoted saying on occasion, 'Hey, we've just collaborated for families!'

An additional mechanism that contributed to the teams' successes was bridging the divides between the status of insider and outsider. As we observed, neighborhood teams transcended boundaries that reflected an "all of us" mentality. The promise of blurred boundaries and inclusiveness removed the lines of "us and them" and "systems and clients." It evolved to a point of recognizing that the social construction of neighborhood membership, professional expertise, system and community insider or outsider are boundaries that only limit the capacity to be members of a larger community. As a lead agency administrator observed, the team members' commitment extended beyond professional boundaries, "I think that the teams want to become a part of the fabric of the neighborhoods" (Field notes, March, 1994). A critical question regarding inclusive boundaries might be to ask if systems also want to become a part of the fabric of the communities, and if the fabric of the surrounding city will include and embrace the neighborhoods of Walnut Grove and Kennedy Manor.

The extent to which agencies demonstrate an "all of us" mentality by abandoning top-down reform designs, by transcending boundaries, and by developing mechanisms for communication and reflection will be the extent to which systems will realize change. Mutual support between and among teams and neighborhoods, shared knowledge, problem-solving and information within and between teams and neighborhoods led to the CBCF

teams' successes. Without similar actions and practices on the part of the systems, the teams cannot do for the systems what the systems will not do for themselves.

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